

By: 
Juan Armenta, President

**BEFORE THE
PHYSICIAN ASSISTANT BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Petition for Reinstatement of:

CHRISTOPHER JOHN PILACZYNSKI, Petitioner.

Case No. 950-2021-003090

OAH No. 2022020064

PROPOSED DECISION

Administrative Law Judge Ruth S. Astle, State of California, Office of Administrative Hearings, heard this matter on March 15, 2022, by videoconference.

Petitioner Christopher John Pilaczynski was present and was unrepresented.

Deputy Attorney General Amber Wipfler appeared on behalf of the Office of the Attorney General.

The record closed and the matter was submitted for decision on March 15, 2022.

FACTUAL FINDINGS

Background

1. On November 7, 2006, the Physician Assistant Board (Board) issued Physician Assistant License No. PA 18727 to petitioner Christopher John Pilaczynski. On August 6, 2013, the Board's Executive Officer filed an Accusation against petitioner, based on petitioner's alcohol related convictions (two convictions for driving under the influence).

2. A Default Decision and Order was entered against petitioner revoking his license on February 2, 2014, to become effective March 4, 2014.

3. On March 14, 2017, petitioner filed a prior Petition for Reinstatement. The Petition was rejected on January 18, 2018, for lack of jurisdiction. The Petition only had one of the two required letters from a physician. On March 8, 2021, petitioner filed this second Petition for Reinstatement.

Petitioner's Evidence

4. Petitioner accepted responsibility for his actions. He acknowledged that he had two convictions for driving under the influence and that he had a problem with alcohol. Petitioner completed criminal probation and at the time of the hearing, petitioner was no longer on criminal probation and no criminal matters were pending.

5. Petitioner testified candidly about his history of alcohol abuse. After his last driving under the influence arrest in 2013, he entered the Genesis House residential treatment program. His sobriety date is May 24, 2013. He is randomly tested for alcohol and has never tested positive.

6. Petitioner continues to attend Alcoholics Anonymous (AA) meetings at least two times week. He has a relapse prevention plan.

7. Petitioner is employed as a surgical technician at Adventist Health in St. Helena, California since April 1, 2019. He is also studying to become a drug and alcohol counselor. He has completed 300 hours toward the 3000 hours he needs to complete his certification.

8. Petitioner has not worked as a Physician Assistant for nine years. He understands that he needs to take a refresher course and retake the licensing exam before he can resume his practice. He has submitted an education plan with his petition.

9. Petitioner has completed 9.5 hours of continuing education in 2021.

10. Petitioner submitted three letters in support of his petition for reinstatement.

a. Mark K. Potter, M.D., a physician at the hospital where petitioner works, wrote a letter dated February 6, 2021. He is aware of petitioner's revocation and fully supports his reinstatement.

b. Martin T. Paukert, M.D., a physician at the hospital where petitioner works, wrote a letter dated March 3, 2021. He is aware of petitioner's revocation and fully supports his reinstatement.

c. Retha Snyder, R.N., Director of Preoperative Services at Adventist Health, and petitioner's supervisor, wrote a letter dated March 3, 2021. She knows about his convictions and his revocation. She finds him to be an invaluable part of their surgical team.

11. Petitioner is willing to abide by any probation conditions imposed by the Board, including a refresher course.

LEGAL CONCLUSIONS

1. Petitioner bears the burden of proving, by clear and convincing evidence, that he is rehabilitated and is entitled to have his license restored. (Bus. & Prof. Code, §§ 3526, and 3530). The Physician Assistant Board may consider why the license expired or was revoked, and all intervening activities by the petitioner, to determine whether relicensure would be in the public interest. (*Id.*, §§ 3526, subd. (a), 3530, subd. (d).)

2. Petitioner had his license revoked by default decision after suffering alcohol-related convictions. Petitioner sought treatment and has been committed to his recovery and has maintained sobriety since May 2013. He continues to attend recovery meetings at least two times a week. He is studying to become an alcohol and drug counselor. He is employed and has a strong support network in the recovery community. By reason of the matters set forth in Findings 4 through 11, petitioner has met his burden of establishing that he has rehabilitated himself and is fit to practice as a physician assistant safely, under appropriate conditions.

Accordingly, it would not be against the public interest to reinstate petitioner's license, with probation conditions to provide ongoing assurance of his rehabilitation and sobriety. Because petitioner has not practiced as a physician assistant for nine years, a refresher course is warranted.

ORDER

The petition of Christopher John Pilaczynski for reinstatement of Physician Assistant License No. PA 18727 is granted. This license is reinstated and immediately revoked. The revocation is stayed, and petitioner is placed on probation for a period of three years on the conditions stated below. However, petitioner is suspended from practice with the exception of participating in the clinical training described in Paragraph 14 of this Order until such time as the Board receives proof of satisfactory completion of the required training.

Each condition of probation contained herein is a separate and distinct condition. If any condition of this Order, or any application thereof, is declared unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other applications thereof, shall not be affected. Each condition of this Order shall separately be valid and enforceable to the fullest extent permitted by law.

1. Approval of Supervising Physician

Within 30 days of the effective date of this decision, petitioner shall submit to the Board or its designee for its prior approval the name and license number of the supervising physician and a practice plan detailing the nature and frequency of supervision to be provided. Petitioner shall not practice until the supervising physician and practice plan are approved by the Board or its designee. Petitioner shall have the supervising physician submit quarterly reports to the Board or its designee. If the supervising physician resigns or is no longer available, petitioner shall, within 15 days, submit the name and license number of a new supervising physician for approval.

Petitioner shall not practice until a new supervising physician has been approved by the Board or its designee.

2. Notification of Employer and Supervising Physician

Petitioner shall notify his current and any subsequent employer and supervising physician(s) of the discipline and provide a copy of the accusation, decision, and order to each employer and supervising physician(s) during his period of probation, before accepting or continuing employment. Petitioner shall ensure that each employer informs the Board or its designee, in writing within 30 days, verifying that the employer and supervising physician(s) have received a copy of Accusation, Decision, and Order. This condition shall apply to any change(s) in place of employment. The petitioner shall provide to the Board or its designee the names, physical addresses, mailing addresses, and telephone numbers of all employers, supervising physicians, and work site monitor, and shall inform the Board or its designee in writing of the facility or facilities at which the person practices as a physician assistant. Petitioner shall give specific, written consent to the Board or its designee to allow the Board or its designee to communicate with the employer, supervising physician, or work site monitor regarding the licensee's work status, performance, and monitoring.

3. Obey All Laws

Petitioner shall obey all federal, state, and local laws, and all rules governing the practice of medicine as a physician assistant in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.

4. Quarterly Reports

Petitioner shall submit quarterly declarations under penalty of perjury on forms provided by the Board or its designee, stating whether there has been compliance with all the conditions of probation.

5. Other Probation Requirements

Petitioner shall comply with the Board's probation unit. Petitioner shall, at all times, keep the Board and probation unit informed of Petitioner's business and residence addresses. Changes of such addresses shall be immediately communicated in writing to the Board and probation unit. Under no circumstances shall a post office box serve as an address of record, except as allowed by California Code of Regulations 1399.511. Petitioner shall appear in person for an initial probation interview with Board or its designee within 90 days of the decision. Petitioner shall attend the initial interview at a time and place determined by the Board or its designee. Petitioner shall, at all times, maintain a current and renewed physician assistant license. Petitioner shall also immediately inform probation unit, in writing, of any travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) days.

6. Interview with Medical Consultant

Petitioner shall appear in person for interviews with the Board's medical or expert physician assistant consultant upon request at various intervals and with reasonable notice.

7. Non-practice While on Probation

Petitioner shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days. Non-practice is defined as any period of time exceeding 30 calendar days in which petitioner is not practicing as a physician assistant. Petitioner shall not return to practice until the supervising physician is approved by the Board or its designee. If, during probation, petitioner moves out of the jurisdiction of California to reside or practice elsewhere, including federal facilities, petitioner is required to immediately notify the Board in writing of the date of departure, and the date of return, if any. Practicing as a physician assistant in another state of the United States or federal jurisdiction while on active probation with the physician assistant licensing authority of that state or jurisdiction shall not be considered non-practice. All time spent in a clinical training program that has been approved by the Board or its designee, shall not be considered non-practice. Non-practice due to a Board ordered suspension or in compliance with any other condition or probation, shall not be considered a period of nonpractice. Any period of non-practice, as defined in this condition, will not apply to the reduction of the probationary term. Periods of non-practice do not relieve petitioner of the responsibility to comply with the terms and conditions of probation. It shall be considered a violation of probation if for a total of two years, petitioner fails to practice as a physician assistant. Petitioner shall not be considered in violation for non-practice as long as petitioner is residing and practicing as a physician assistant in another state of the United States and is on active probation with the physician assistant licensing authority of that state, in which case the two-year period shall begin on the date probation is completed or terminated in that state.

8. Unannounced Clinical Site Visit

The Board or its designee may make unannounced clinical site visits at any time to ensure that petitioner is complying with all terms and conditions of probation.

9. Condition Fulfillment

A course, evaluation, or treatment completed after the acts that gave rise to the charges in the Accusation but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of the condition.

10. Completion of Probation

Petitioner shall comply with all financial obligations (e.g., probation costs) no later than 60 calendar days prior to the completion of probation. Upon successful completion of probation, Petitioner's license will be fully restored.

11. Violation of Probation

If petitioner violates probation in any respect, the Board after giving petitioner notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is filed against petitioner during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

12. Probation Monitoring Costs

Petitioner shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an

annual basis. The costs shall be made payable to the Physician Assistant Board and delivered to the Board no later than January 31 of each calendar year.

13. Voluntary License Surrender

Following the effective date of this probation, if petitioner ceases practicing due to retirement, health reasons, or is otherwise unable to satisfy the terms and conditions of probation, petitioner may request, in writing, the voluntary surrender of petitioner's license to the Board. Petitioner's written request to surrender his or her license shall include the following: his or her name, license number, case number, address of record, and an explanation of the reason(s) why petitioner seeks to surrender his or her license. The Board reserves the right to evaluate the petitioner's request and to exercise its discretion whether to grant the request or to take any other action deemed appropriate and reasonable under the circumstances. Petitioner shall not be relieved of the requirements of his or her probation unless the Board or its designee notifies petitioner in writing that petitioner's request to surrender his or her license has been accepted. Upon formal acceptance of the surrender, petitioner shall, within 15 days, deliver petitioner's wallet and wall certificate to the Board or its designee and shall no longer practice as a physician assistant. Petitioner will no longer be subject to the terms and conditions of probation and the surrender of petitioner's license shall be deemed disciplinary action. If petitioner re-applies for a physician assistant license, the application shall be treated as a petition for reinstatement of a revoked license.

14. Clinical Training Program

Within 60 days of the effective date of this decision, petitioner shall submit to the Board or its designee for prior approval, a clinical training or educational program

such as the Physician Assessment and Clinical Education Program (PACE) offered by the University of California – San Diego School of Medicine or equivalent program as approved by the Board or its designee. The exact number of hours and specific content of the program shall be determined by the Board or its designee. The program shall determine whether petitioner has successfully completed and passed the program. Petitioner shall pay the cost of the program. If the program makes recommendations for the scope and length of any additional educational or clinical training, treatment for any medical or psychological condition, or anything else affecting petitioner's practice as a physician assistant, petitioner shall comply with the program recommendations and pay all associated costs. Petitioner shall successfully complete and pass the program not later than six months after petitioner's initial enrollment. The program determines whether or not the petitioner successfully completes the program. If petitioner fails to either 1) complete the program within the designated time period, or 2) to pass the program, as determined by the program, petitioner shall cease practicing as a physician assistant immediately after being notified by the Board or its designee. Petitioner shall not be issued a license to practice as a physician assistant until petitioner has successfully completed and passed the program, as determined by the program, and has been so notified by the Board or its designee in writing, except that petitioner may practice only in the program.

15. Clinical Diagnostic Evaluation (CDE)

Within 30 days from the effective date of the Decision and Order and thereafter as required by the Board, petitioner shall undergo a CDE from a licensed practitioner who holds a valid, unrestricted license to conduct CDEs, has three (3) years' experience in providing evaluations of health care professionals with substance abuse disorders, and is approved by the Board. The evaluations shall be conducted in accordance with

accepted professional standards for conducting a substance abuse CDE. Petitioner shall undergo a CDE to determine whether the petitioner has a substance abuse problem and whether the petitioner is a threat to himself or herself or others. The evaluator shall make recommendations for substance abuse treatment, practice restrictions, or other recommendations related to the petitioner's rehabilitation and safe practice. Petitioner shall not be evaluated by an evaluator that has a financial, personal, or business relationship with the petitioner within the last five (5) years. The evaluator shall provide an objective, unbiased, and independent evaluation. During the evaluation, if petitioner is determined to be a threat to himself or herself or others, the evaluator shall notify the Board within 24 hours of such a determination. For all evaluations, a final written report shall be provided to the Board no later than ten (10) days from the date the evaluator is assigned the matter unless the evaluator requests additional information to complete the evaluation, not to exceed thirty (30) days. Petitioner may return to either full-time or part-time work if the Board determines he or she is fit to do so based upon consideration of the CDE report and the following criteria:

- License type;
- Licensee's history;
- Documented length of sobriety/time that has elapsed since last substance use;
- Scope and pattern of use;
- Treatment history;
- Medical history and current medical condition;
- Nature, duration and severity of substance abuse; and,

- Whether the licensee is a threat to himself or herself or others.

The Board shall determine whether or not the petitioner is safe to return to full-time or part-time work, and what restrictions shall be imposed on the petitioner. However, petitioner shall not return to practice until he or she has thirty days of negative drug tests. If petitioner is required to participate in inpatient, outpatient, or any other type of treatment, the Board shall take into consideration the recommendation of the CDE, license type, licensee's history, length of sobriety, scope and pattern of substance abuse, treatment history, medical history, current medical condition, nature, duration and severity of substance abuse and whether the licensee is a threat to himself or herself or others. In the event that any Condition Applying the Uniform Standards requires interpretation or clarification, the Uniform Standards shall be controlling.

16. Abstain from the Use of Alcohol

shall abstain completely from the use of alcoholic beverages. This condition may be waived by the Board upon a written finding by the CDE that petitioner is not a substance abusing licensee.

17. Abstain from the Use of Controlled Substances and Dangerous Drugs

Petitioner shall abstain completely from personal use, possession, injection, consumption by any route, including inhalation of all controlled substances as defined in the California Uniform, Controlled Substances Act. This prohibition does not apply to medications lawfully prescribed to petitioner for a bona fide illness or condition by a practitioner licensed to prescribe such medications. Within fifteen (15) calendar days of receiving any lawful prescription medications, petitioner shall notify the recovery program in writing of the following: prescriber's name, address, and telephone

number; medication name and strength, issuing pharmacy name, address, and telephone number. Petitioner shall also provide a current list of prescribed medication with the prescriber's name, address, and telephone number on each quarterly report submitted. Petitioner shall provide the probation monitor with a signed and dated medical release covering the entire probation period. Petitioner shall identify for the Board's approval a single coordinating physician and surgeon who shall be aware of petitioner's history of substance abuse and who will coordinate and monitor any prescriptions for petitioner for dangerous drugs, and controlled substances. Once a Board-approved physician and surgeon has been identified, petitioner shall provide a copy of the Initial Probationary License Decision and Order, Statement of Issues or Accusation, Decision and Order, or Stipulated Decision and Order to the physician and surgeon. The coordinating physician and surgeon shall report to the Board or its designee on a quarterly basis petitioner's compliance with this condition. The Board may require that only a physician and surgeon who is a specialist in addictive medicine be approved as the coordinating physician and surgeon.

If petitioner has a positive drug screen for any substance not legally authorized, petitioner shall be contacted and instructed to leave work and ordered by the Board to cease any practice and may not practice unless and until notified by the Board. The Board will notify petitioner's employer, if any, and worksite monitor, if any, that petitioner may not practice. If the Board files a petition to revoke probation or an accusation based upon the positive drug screen, petitioner shall be automatically suspended from practice pending the final decision on the petition to revoke probation or accusation. This period of suspension will not apply to the reduction of

this probationary period. This condition may be waived or modified by the Board upon a written finding by the CDE that petitioner is not a substance abusing licensee.

18. Drug and Alcohol Recovery Monitoring Program

Within fifteen (15) calendar days from the effective date of this Decision and Order, petitioner shall enroll, participate in, and successfully complete the Board's drug and alcohol recovery monitoring program at petitioner's cost until the drug and alcohol recovery monitoring program determines that participation in the drug and alcohol recovery monitoring program is no longer necessary. Petitioner shall comply with all components of the drug and alcohol recovery monitoring program. Petitioner shall sign a release authorizing the drug and alcohol recovery monitoring program to report all aspects of participation of the drug and alcohol recovery monitoring program as requested by the Board or its designee. Failure to comply with requirements of the drug and alcohol recovery monitoring program, terminating the program without permission or being expelled for cause shall constitute a violation of probation by petitioner and shall be immediately suspended from the practice as a physician assistant. Probation shall be automatically extended until petitioner successfully completes the program. This condition may be waived or modified by the Board or its designee upon a written finding by the CDE that petitioner is not a substance abusing licensee.

19. Biological Fluid Testing

Petitioner shall immediately submit to and pay for any random and directed biological fluid or hair sample, breath alcohol or any other mode of testing required by the Board or its designee. Petitioner shall be subject to a minimum of fifty-two (52) random tests per year within the first year of probation and a minimum of thirty-six

(36) random tests per year, for the duration of the probationary term up to five years and a minimum of one (1) test per month in each year of probation after the fifth year provided that there have been no positive test results during the previous five (5) years. The Board or its designee may require less frequent testing if any of the following applies:

- Where petitioner has previously participated in a treatment or monitoring program requiring testing, the board or its designee may consider that prior testing record in applying the testing frequency schedule described above;

- Where the basis for probation or discipline is a single incident or conviction involving alcohol or drugs, or two incidents or convictions involving alcohol or drugs that were at least seven (7) years apart, that did not occur at work or on the way to or from work, the Board or its designee may skip the first-year testing frequency requirement(s) of a minimum of fifty-two (52) random tests per year and participate in the second year of testing frequency requirement of a minimum of thirty-six (36) random tests per year.;

- Where petitioner is not employed in any health care field, frequency of testing may be reduced to a minimum of twelve (12) tests per year. If petitioner wishes to thereafter return to employment in a health care field, petitioner shall be required to test at least once a week for a period of sixty (60) days before commencing such employment, and shall thereafter be required to test at least once a week for a full

year, before petitioner may be reduced to a testing frequency of no less than twenty-four (24) tests per year;

- Where petitioner has a demonstrated period of sobriety and/or non-use, the Board or its designee may reduce the testing frequency to no less than twenty-four (24) tests per year.

Petitioner shall make daily contact as directed by the Board to determine if he must submit to drug testing. Petitioner shall have the test performed by a Board-approved laboratory certified and accredited by the U.S. Department of Health and Human Services on the same day that he or she is notified that a test is required. This shall ensure that the test results are sent immediately to the Board. Failure to comply within the time specified shall be considered an admission of a positive drug screen and constitute a violation of probation. If the test results in a determination that the urine was too diluted for testing, the result shall be considered an admission of a positive urine screen and constitutes a violation of probation. If a positive result is obtained, the Board may require petitioner to immediately undergo a physical examination and to complete laboratory or diagnostic testing to determine if any underlying physical condition has contributed to the diluted result and to suspend petitioner's license to practice. Any such examination or laboratory and testing costs shall be paid by petitioner. If it is determined petitioner altered the test results, the result shall be considered an admission of a positive urine screen and constitutes a violation of probation and petitioner must cease practicing. Petitioner shall not resume practice until notified by the Board. If petitioner tests positive for a banned substance, petitioner shall be contacted and instructed to leave work and ordered to cease all practice. Petitioner shall not resume practice until notified by the Board. All alternative drug testing sites due to vacation or travel outside of California must be approved by

|

the Board prior to the vacation or travel. This condition may be waived or modified by the Board or its designee upon a written finding by the CDE that petitioner is not a substance abusing licensee.

20. Facilitated Group Support Meetings

Within fifteen (15) days from the effective date of the decision, petitioner shall submit to the Board or its designee for prior approval the name of one or more meeting facilitators. Petitioner shall participate in facilitated group support meetings within fifteen (15) days after notification of the Board's or designee's approval of the meeting facilitator. When determining the type and frequency of required facilitated group support meeting attendance, the Board or its designee shall give consideration to the following:

- The licensee's history;
- The documented length of sobriety/time that has elapsed since substance abuse;
- The recommendation of the clinical evaluator;
- The scope and pattern of use;
- The licensee's treatment history; and,
- The nature, duration, and severity of substance abuse.

Verified documentation of attendance shall be submitted by petitioner with each quarterly report. Petitioner shall continue attendance in such a group for the duration of probation unless notified by the Board that attendance is no longer

required. If a facilitated group support meeting is ordered, the group facilitator shall meet the following qualifications and requirements:

1. The group meeting facilitator shall have a minimum of three (3) years' experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state or other nationally certified organizations.

2. The group meeting facilitator shall not have a financial relationship, personal relationship, or business relationship with the licensee in the last one (1) year.

3. The group facilitator shall provide to the Board or its designee a signed document showing the licensee's name, the group name, the date and location of the meeting, the licensee's attendance, and the licensee's level of participation and progress.

4. The group meeting facilitator shall report any unexcused absence to the Board or its designee within twenty-four (24) hours.

This condition may be waived or modified by the Board upon a written finding by the CDE that petitioner is not a substance abusing licensee.

21. Work Site Monitor

Petitioner shall have a worksite monitor as required by this term. The worksite monitor shall not have any current or former financial, personal, or familial relationship with the licensee, or other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board. If it is impractical for anyone but the licensee's employer or supervising physician to serve as the worksite monitor, this requirement may be waived by the Board. However, under no circumstances shall a licensee's worksite monitor be an

employee of the licensee. The worksite monitor's license scope of practice shall include the scope of practice of the licensee who is being monitored or be another health care professional if no monitor with like scope of practice is available. The worksite monitor shall have an active unrestricted license, with no disciplinary action within the last five (5) years. The worksite monitor shall sign an affirmation that he or she has reviewed the terms and conditions of the licensee's disciplinary order and agrees to monitor the licensee as set forth by the Board. The worksite monitor must adhere to the following required methods of monitoring the licensee:

a) Have face-to-face contact with the licensee at least once per week in the work environment or more frequently if required by the Board.

b) Interview other staff in the office regarding the licensee's behavior, if applicable.

c) Review the licensee's work attendance.

The worksite monitor shall report to the Board as follows:

Any suspected substance abuse must be verbally reported to the Board and the licensee's employer within one (1) business day of occurrence. If occurrence is not during the Board's normal business hours the verbal report must be within one (1) hour of the next business day. A written report shall be submitted to the Board within 48 hours of occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board. The report shall include: the licensee's name; license number; worksite monitor's name and signature; worksite monitor's license number; worksite location(s); dates licensee had face- to-face contact with monitor; staff interviewed if

applicable; attendance report; any change in behavior and/or personal habits; any indicators leading to suspected substance abuse. The licensee shall complete the required consent forms and sign an agreement with the worksite monitor and the Board to allow the Board to communicate with the worksite monitor. If petitioner tests positive for a banned substance, the Board will immediately notify petitioner's employer that the petitioner's license has been ordered to cease practice.

This condition may be waived or modified by the Board upon a written finding by the CDE that petitioner is not a substance abusing licensee.

22. Major Violations

This provision applies if the licensee commits a violation of the drug and alcohol recovery monitoring program or any other condition applying the uniform standards specific to controlled substance. If petitioner commits a major violation, petitioner shall immediately upon notification by the Board, cease practice until notified otherwise in writing by the Board. Major Violations include, but are not limited to, the following:

1. Failure to complete a Board-ordered program;
2. Failure to undergo a required CDE;
3. Committing multiple minor violations of probation conditions;
4. Treating a patient while under the influence of drugs or alcohol;
5. Committing any drug or alcohol offense that is a violation of the Business and Professions Code or state or federal law;
6. Failure to obtain biological testing for substance abuse;

7. Testing positive for a banned substance; and

8. Knowingly using, making, altering, or possessing any object or product in such a way as to defraud a drug test designed to detect the presence of alcohol or a controlled substance.

DATE: 04/04/2022

Ruth S. Astle

Ruth S. Astle (Apr 4, 2022 13:05 PDT)

RUTH S. ASTLE

Administrative Law Judge

Office of Administrative Hearings